

2027 BENEFITS

designed with YOU in mind



Open Enrollment Guide



HEALTH



WEALTH



SELF

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ENROLL for *benefits*

Choosing benefits is one of the most important decisions you'll make all year.

Important reminders

- **If you want to keep your current benefits in 2027**, you don't have to do anything during the enrollment period. Your current benefits will carry forward, except for any Flexible Spending Accounts and Health Savings Accounts contribution amounts. FSA and HSA participants are required to re-enroll each year.
- **Spousal/Domestic Partner Surcharge:** The Surcharge applies when a covered spouse or domestic partner has access to employer-sponsored medical coverage, either as an employee or a dependent, but elects coverage under an Aristocrat medical plan instead. Please review your coverage status and complete the required attestation during enrollment.
- **New employees: Enroll within 30 days from your date of hire.** If you don't enroll within this time period, you will not have benefits coverage, except for plans and programs that are fully paid for by Aristocrat.
- **Open Enrollment: Enroll before the enrollment deadline.** If you miss the deadline and don't enroll or make changes to your benefits, your current benefits will carry over to the new plan year with the exception of FSA and HSA elections. You must enroll in these benefits annually. If you are not enrolled and you don't take any action you'll have to wait until the next Open Enrollment, unless you experience a qualified life event, to enroll or change benefits. You will however be enrolled in the company paid benefits including basic life/accidental death & dismemberment, disability, and employee assistance plan (EAP).

Use this guide to:



Review your benefit choices, including any new plans and benefit changes.



Understand how the plans work.



Learn about the tools and resources available with each plan.



Select the benefits that work the best for you and your family.



QUESTIONS? We Can Help

Contact TouchCare:

866-486-8242

assist@touchcare.com

www.touchcare.com/ask

Open Enrollment Support:

www.touchcare.com/openenrollment

Email mypc@aristocrat.com

Visit www.atibenefits.com

Who Can Enroll?

- **Full-time employees (30+ hrs./wk.)** – Eligible upon hire; must choose benefits within 30 days of hire date.
- **Eligible dependents** – Includes your legal spouse/domestic partner and children to age 26, plus disabled dependent children of any age who meet plan criteria.

Your Enrollment Opportunities

① Upon Hire

You become eligible for most benefits on the first day of employment.

② During Open Enrollment

This is your annual opportunity to enroll for benefits or change your existing benefits. This year's Open Enrollment period is: **November 2– November 13, 2026.**

Generally, benefits you elect during Open Enrollment will be effective January 1 through December 31, unless you experience a qualifying life event that lets you change coverage mid-year or makes you ineligible for coverage.

③ Following a Life Event

If you experience a status change or a qualifying life event during the year that affects your eligibility for benefits, you may be able to enroll for coverage in new plans and change existing coverage. You must notify MyP&C (mypc@aristocrat.com) within 30 days of the event to make changes.



TouchCare

Complementary healthcare concierge service!

TouchCare will work on your behalf to:

- Help you select the right benefits plans during open enrollment
- Answer any benefit-related questions, simple or complex
- Provide guidance with claim reviews
- And more!

Download the
IOS/Android app



Simple Ways to Enroll or Change Your Benefits

① ONLINE

Log on to review and choose benefits



Go to Workday through the OKTA dashboard

② ALEX

Receive help from your online benefit counselor



www.start.myalex.com/aristocrat

③ TouchCare

Benefit question help



General Benefit Questions:
866-486-8242
assist@touchcare.com
www.touchcare.com/ask

Open Enrollment Support:
www.touchcare.com/openenrollment

Qualifying Life Events

Qualifying life events include, but aren't limited to, marriage, divorce, legal separation, birth or adoption of a child, or a change to your or your spouse/domestic partner's employment status that affects your eligibility for benefits.



Life Event Key Points

1. Benefit changes must be CONSISTENT with the life event

Example: Your spouse just gave birth.
You can't remove your spouse from your medical coverage when this happens because that isn't consistent with the event. But you could add dependent coverage for the newborn child.

2. You have 30 DAYS to request changes to your benefits

To request a change in benefits, contact MyP&C (mypc@aristocrat.com) and submit changes within 30 days of when the event occurred.

NOT Qualifying Life Events



What Benefits Can Be Changed When						
Benefit that can be changed	Change in marital status (marriage, divorce, death of spouse/ DP)	Change in number of dependents (birth, adoption, death of dependent)	Start or end of employment (by spouse/ DP or dependent)	Change in your work hours	Significant change in health care plan coverage (through your spouse/ DP's plan)	Changes allowed anytime during the year (qualifying life event not necessary)
Medical, Dental, Vision	X	X	X	X	X	
Health Savings Account	X	X	X	X	X	X
Health Care FSA	X	X	X	X	X	
Dependent Care FSA	X	X	X	X		
Employee Voluntary Life/AD&D, Spouse/DP/ Dependent Life	X	X	X	X		
Required Documentation	Marriage certificate, divorce decree, death certificate	Birth certificate, adoption agreement, or death certificate	Letter from employer confirming benefit start or end date, including dependents covered.		Letter from spouse/DP's employer confirming coverage change and effective date	None



Health insurance exists to help offset the costs of medical events, whether they're planned or happen unexpectedly. The cost of health insurance will vary based on your individual situation, like your age, where you live, or even lifestyle.

Insurance doesn't pay everything, leaving you with out-of-pocket costs. In addition to your plan premiums, out-of-pocket costs include copayments, deductibles, and coinsurance. Each plan also includes an out-of-pocket maximum. It's important to understand how these costs work before you choose a plan.

Medical

For 2027, you have a choice of medical plans giving you the flexibility to choose what's best for your needs and budget.

- **Aetna PPO (Base and Buy-Up)**, the PPO plans, allow participants to see any doctor or specialist, but they typically pay less when using in-network providers. The PPO plans usually come with higher premiums, but offers co-pays for physician visits and prescription drugs without needing to meet the deductible. Out-of-pocket expenses can be moderate to high, but can be lowered if you use in-network providers.
- **Aetna HDHP**, the HDHP plan, features low premiums in exchange for a high deductible. This plan is designed to work with a tax-advantaged health savings account.
- **Aetna EPO**, the EPO plan, allows you to receive health care services from the plan's network of providers. Out-of-network services are not covered.

Key features

All of Aristocrat's medical plans offer:

- Comprehensive, affordable coverage for a wide range of health care services.
- In-network preventive care, with services covered at 100%, including annual physicals, recommended immunizations, well-woman and well-child exams, flu shots, and routine cancer screenings.
- Prescription drug coverage is included with all Aetna medical plans through Express Scripts. The plan now follows the National Preferred Formulary, and GLP-1 medications for weight loss are administered through Virta Health (see page 15).
- Financial protection through annual out-of-pocket maximums that limit the amount you'll pay each year.
- Enhanced clinic support program, providing personalized and coordinated care for members

Aetna PPO and HDHP medical plans offer:

- Flexibility to see any provider you want, although you'll save money when you stay in-network.

Spouse/Domestic Partner Surcharge

The medical plan includes a spousal/domestic partner surcharge. This is an additional monthly fee for employees who choose to cover a spouse/domestic partner that has access to their own employer-sponsored health insurance. If applicable, you'll pay a monthly surcharge of \$150. Be sure to read through the Spousal/Domestic Partner Surcharge Agreement in Workday when you submit your enrollment. Medicare participants are excluded.

Summary of Benefits and Coverage

The Health section of this guide provides an overview of your medical plan options. You can find detailed information about each plan, including a breakdown of costs, in each plan's Summary of Benefits and Coverage (SBC). The SBCs summarize important information about your health coverage options in a standard format to help you compare costs and features across plans. The SBCs are available on www.atibenefits.com.

Choosing a health plan

Selecting the right health plan is one of the most important decisions you'll make all year. No two plans are exactly alike, so it's smart to comparison shop before you enroll. (See chart on the next page.) Consider the premium cost and the cost of care when choosing.

Which plan is right for you?

Consider which plan features are most important to you. Do you want to:	Aetna EPO	Aetna PPO Base	Aetna PPO Buy-Up	Aetna HDHP
Have access to a tax-advantaged account, which you can use to help pay for eligible expenses.				✓
Pay the lowest premium cost, which may make it the least expensive option if you expect to have low health care usage?				✓
Balance your out-of-pocket and paycheck costs with a moderate deductible and premium cost?	✓	✓		
Pay the highest premium cost to keep your out-of-pocket costs as low as possible when you need care?			✓	

Medical plan costs

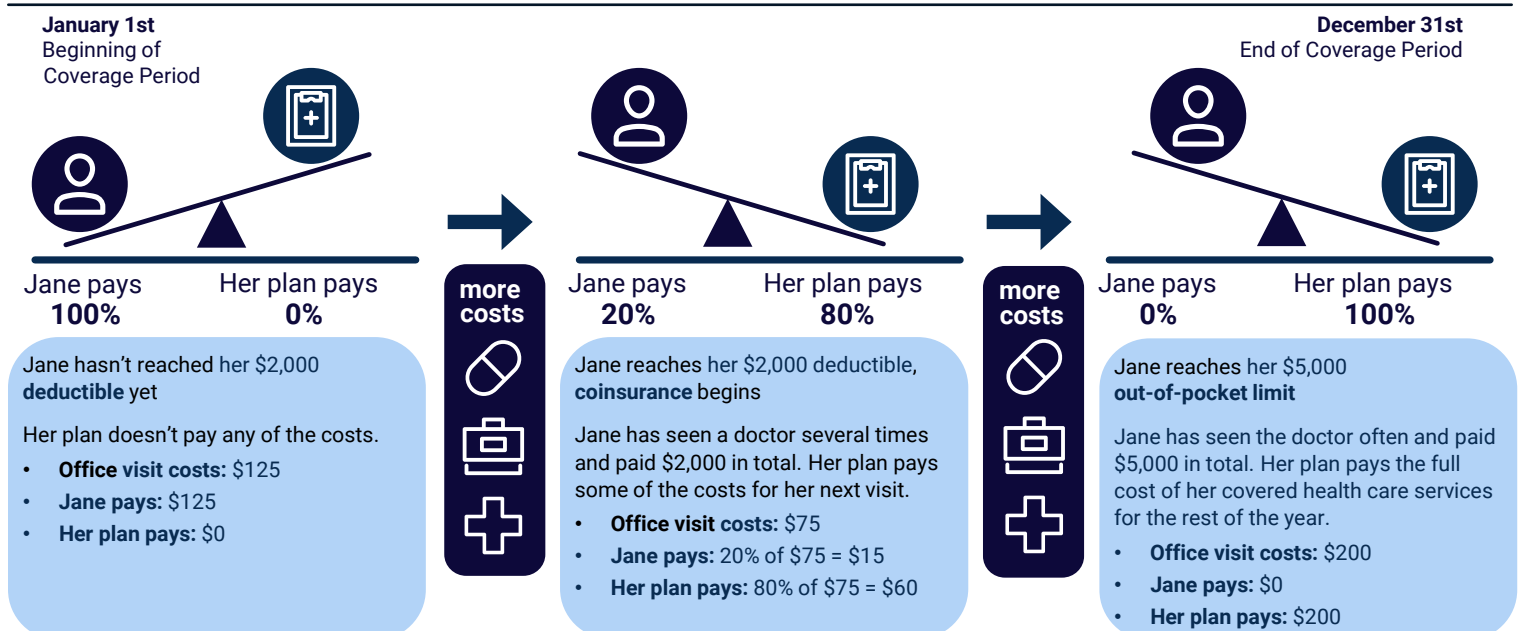
You and Aristocrat share the cost of your medical benefits — Aristocrat pays a generous portion of the total cost and you pay the remainder through payroll deductions. Your specific cost is based on the plan and coverage level you selected.

2027 per pay-check deductions (before tax)

Coverage level	Aetna EPO	Aetna PPO Base	Aetna PPO Buy-Up	Aetna HDHP
Employee Only	\$21.95	\$55.88	\$134.22	\$15.23
Employee + Spouse/DP	\$155.84	\$254.26	\$479.17	\$110.45
Employee + Spouse/DP (Surcharge)	\$225.07	\$323.49	\$548.40	\$179.68
Employee + Child(ren)	\$97.86	\$162.34	\$309.80	\$86.84
Family	\$202.24	\$305.74	\$541.34	\$151.01
Family (Surcharge)	\$271.47	\$374.97	\$610.57	\$220.24

You and Your Insurer Share Costs – Example

Jane's Plan Deductible: \$2,000 Coinsurance: 20% Out-of-Pocket Limit: \$5,000



Compare medical plans

The chart below provides a comparison of key coverage features and costs.

Coverage	Aetna EPO	Aetna PPO Base		Aetna PPO Buy-Up		Aetna HDHP	
	In-Network	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Annual deductible							
Per person/per family	\$500 / \$1,000	\$2,000 / \$4,000	\$4,000 / \$8,000	\$1,000 / \$2,000	\$2,000 / \$4,000	\$2,000 / \$4,000	\$4,000 / \$8,000
Out-of-pocket maximum							
Per person/per family	\$3,000 / \$6,000	\$5,000 / \$10,000	\$10,000 / \$20,000	\$4,000 / \$8,000	\$8,000 / \$16,000	\$5,000 / \$6,900 / \$10,000	\$10,000 / \$10,000 / \$20,000
Medical coverage							
Office visits (PCP/SPC)	\$20 / \$40	\$25 / \$50	50%*	\$15 / \$30	40%*	20%*	40%*
Preventive care	No charge	No charge	50%*	No charge	40%*	No charge	40%*
Outpatient surgery	20%*	20%*	50%*	20%*	40%*	20%*	40%*
Inpatient hospital (per stay)	20%*	20%*	50%*	20%*	40%*	20%*	40%*
Emergency room	\$300	\$350	50%*	\$250	40%*	20%*	40%*
Teladoc	No charge	No charge	Not Covered	No charge	Not Covered	Deductible + Copay	Not Covered
Labs and X-rays	No charge / \$25	20%*	50%*	20%*	40%*	20%*	40%*
Retail prescription drugs (30-day supply) - Pharmacy Benefit through Express Scripts							
Generic	\$10	\$15	\$15 + 30%	\$10	\$10 + 20%	\$10 ¹	\$10 + 30%
Preferred Brand	\$40	\$40	\$40 + 30%	\$30	\$30 + 20%	\$40 ¹	\$40 + 30%
Non-Preferred Brand	\$100	\$100	\$100 + 30%	\$75	\$75 + 20%	\$100 ¹	\$100 + 30%
Specialty	\$150	\$150	Not Covered	\$100	Not Covered	\$150 ¹	Not Covered
Mail-order prescription drugs (90-day supply) - Pharmacy Benefit through Express Scripts							
Generic	\$20	\$30	Not Covered	\$20	Not Covered	\$20 ¹	Not Covered
Preferred Brand	\$80	\$80	Not Covered	\$60	Not Covered	\$80 ¹	Not Covered
Non-Preferred Brand	\$200	\$200	Not Covered	\$150	Not Covered	\$200 ¹	Not Covered
Specialty	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered

Money-Saving Tips

To stretch your health care dollars, remember to:

- **See in-network providers** who have agreed to accept lower negotiated rates. Visit your plan website to search for in-network providers near you.
- **Use the mail-order pharmacy** to save time and money when refilling long-term prescriptions.

Spousal/domestic partner surcharge

A spousal/domestic partner surcharge is an additional fee or premium you are required to pay if your spouse/domestic partner has an alternative source for health care coverage through their own employer but decides to be added to Aristocrat's plan. If applicable, you'll pay a monthly surcharge of \$150. Be sure to read through the Spousal/Domestic Partner Surcharge Agreement in Workday when you submit your enrollment. Medicare participants are excluded.

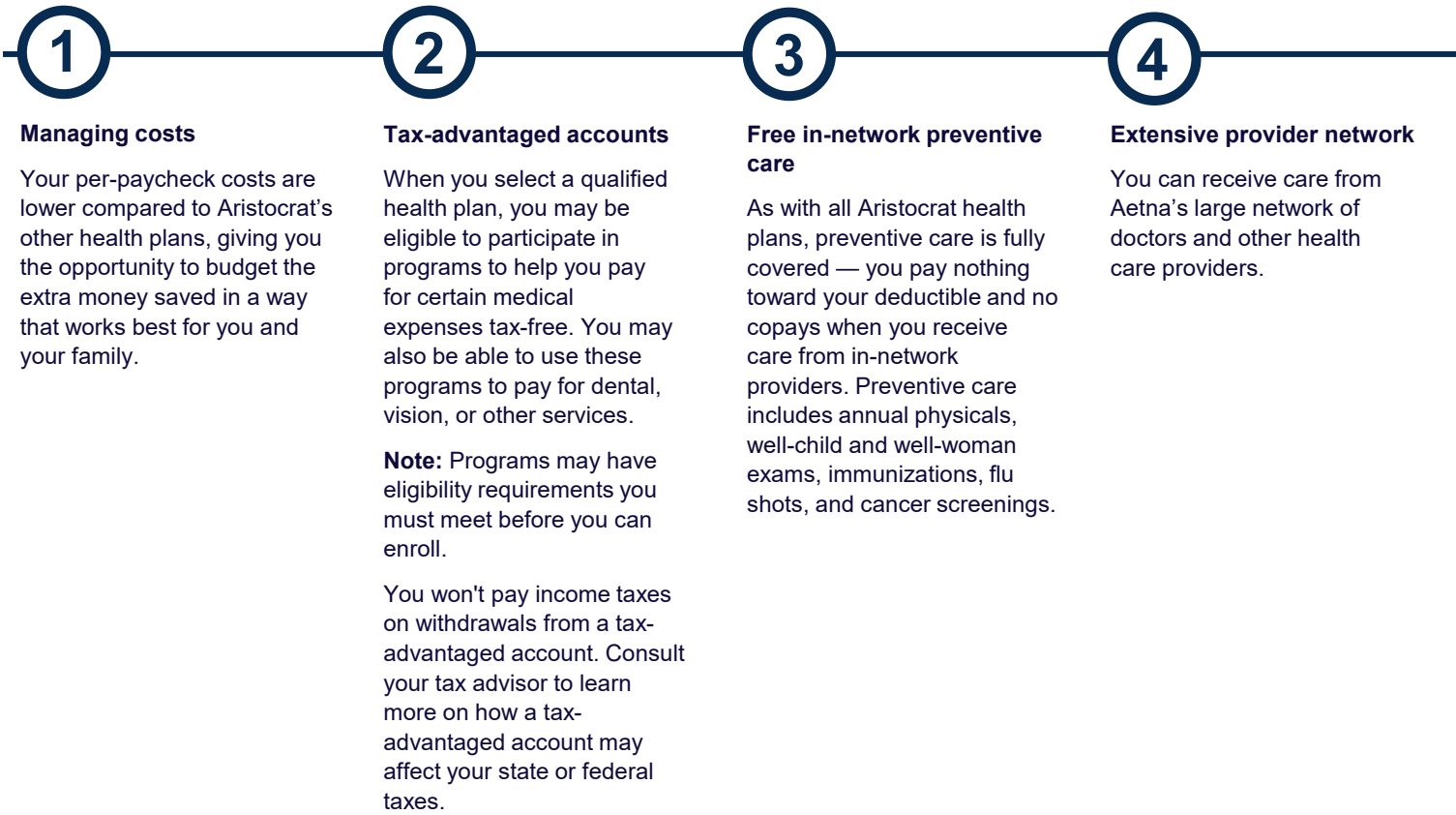
Benefits with an asterisk () require that the deductible be met before the Plan begins to pay.

¹ Medical deductible applies unless Preventative Rx. Deductible must be met before copay applies.

A closer look at the HDHP

The high deductible health plan (HDHP) costs you less from your paycheck, so you keep more of your money. This rewards you for taking an active role as a health care consumer, as a result you could save on your health care costs.

Features of a low-cost, high-deductible plan



Spending and Savings Accounts

Your contributions, and any company contributions to the Health Savings Account and Health Reimbursement Arrangement may help pay your deductible and coinsurance.

Preventive Care

This plan pays 100%.

Deductible

You pay 100%. Once you meet the deductible, coinsurance kicks in.

Coinsurance

You and the plan share a percentage of the cost of services until you meet the out-of-pocket maximum.

Out-of-Pocket Maximum

Once you reach this, the plan pays 100% of in-network costs.

Health Savings Account (HSA)

If you enroll in the HDHP, you may be eligible to open an HSA. An HSA is a tax-free savings account you can use to pay for eligible health expenses anytime, even in retirement.

How does an HSA work?

Build tax-free savings. You can make before-tax deductions from your paycheck into your HSA, allowing you to save money by using tax-free dollars to pay for eligible medical and Rx, dental, and vision expenses. The total amount that can be contributed to your HSA each year is limited by the IRS: ([www.hsabank.com/HSABank/Learning-Center/IRS-contribution-limits-and-guidelines](https://hsabank.com/HSABank/Learning-Center/IRS-contribution-limits-and-guidelines))

Note: The following limits for 2027 include any Company contributions you receive:

- Up to \$4,500 for employee-only coverage.
- Up to \$9,000 if you cover dependents.
- Add \$1,000 to these limits if you're age 55 or older.

Receive Company contributions. For 2027, Aristocrat may make the following contribution to your account:

- \$1,000 (\$38.46 bi-weekly) for employee-only coverage.
- \$2,000 (\$76.92 bi-weekly) if you cover dependents.
- **Important:** During Open Enrollment, you have to actively elect the HSA plan for 2027 to receive Aristocrat's HSA contribution to your account. The maximum amount you may contribute for 2027, along with any Company contributions, will be prorated based on your actual hire date on a bi-weekly basis.

Keep your money. Unlike an FSA, the money in your HSA is always yours to keep and can be rolled over from year to year. You can take your unused balance with you when you retire or leave Aristocrat.

Use it like a bank account. Pay for eligible expenses for yourself and your family by swiping your HSA debit card or reimburse yourself for payments you've made (up to the available account balance). Remember, you may only access money that is actually in your HSA when making a purchase or withdrawal. Be sure to keep receipts for your records.

Earn interest and invest for the future. Once your interest-bearing HSA reaches a minimum balance of \$1,000, you can invest in a variety of stocks, mutual funds, ETFs and more.

(<https://hsabank.com/HSABank/Members/HSA-Investment-Options>)

Never pay taxes. Contributions are made on a before-tax basis, and your withdrawals will never be subject to federal income taxes when used for eligible expenses. Any interest or earnings on your HSA balance build tax-free, too.*

** Money in an HSA grows tax-free and can be withdrawn tax-free if it is used to pay for qualified health care expenses (for a list of eligible expenses, see IRS Publication 502, available at www.irs.gov/forms-pubs/about-publication-502). If money is used for ineligible expenses, you will pay ordinary income tax on the amount withdrawn plus a 20% penalty tax before age 65. After age 65, withdrawals for ineligible expenses are not penalized. Please review your state regulations and talk with a tax advisor as you may have to pay state taxes depending on your residency.*

HSA eligibility

To establish and contribute to an HSA, you:

- Must be enrolled in Aristocrat's Aetna HDHP plan.
- Cannot be covered by any other medical plan that is not a qualified high deductible plan. This includes a spouse's medical coverage unless it's an HSA-qualified plan.
- Cannot be enrolled in any reimbursement plan that pays for medical expenses before meeting the Aetna HDHP deductible
- Cannot be enrolled in a traditional Health Care FSA in 2027.
- Cannot be enrolled in Medicare, including Parts A or B, Medicaid, or TRICARE.
- Cannot be claimed as a dependent on another person's tax return.
- Have not received any Veteran's Administration health benefits for a non-service connected disability in the last three months.
- Have not used Indian Health Services coverage in the last three months.

USING YOUR HSA

1 START IT



When you enroll in the HDHP medical plan, you will be eligible for the HSA account. Elect how much you want to contribute up to the IRS limit.

2 BUILD IT



Aristocrat will deposit an **employer contribution** into your account each pay period. You can change how much you contribute throughout the year if it doesn't exceed the IRS limit.

3 USE IT



Use your HSA balance to pay for eligible expenses, tax-free, including your deductible, coinsurance, prescriptions, and more.

4 GROW IT



Unused money in your HSA automatically rolls over from year to year. **You never lose funds in your HSA.**

* All tax references are for federal income taxes. State and other taxes vary, depending on your residency. Check with your tax advisor for more details.

Flexible Spending Accounts (FSAs)

Now let’s take a quick look at the other type of account you may be able to select — a spending account.

Aristocrat offers three types of flexible spending accounts (FSAs) to help you save on medical, dental, vision, and many daycare expenses: Health Care FSA, Limited Purpose FSA, and Dependent Care FSA

Remember, you can’t have a full-service Health Care FSA and an HSA at the same time. You can, however, choose an HSA along with a Limited Purpose FSA to use for dental and vision expenses only.

FSA Fast Facts



Contribution limits. Set aside up to \$3,500¹ for eligible health care expenses and \$3,750 or \$7,500^{1,3} for dependent care expenses. Unused funds, except what can be rolled over, are forfeited at year’s end.



Lower your taxable income. Money you set aside is pretax dollars, so you pay taxes on a smaller amount.



Take advantage of payroll deduction. Contribute equal amounts each pay period.



Changes not allowed. Unless you experience a qualifying life event, you cannot change your annual contribution amount.



Separate accounts. You cannot use Health Care FSA funds to pay dependent care expenses, or vice versa.

Use-It-Or-Lose-It Rule

Plan your health care & limited purpose FSA contribution amount carefully. Any unused funds greater than any allowed rollover amount are forfeited. Visit www.hsabank.com for help estimating expenses. Be sure to keep all expense receipts for your tax records because you may need to provide proof of eligible expenses and how the funds were used.

Quick Look: YOUR FSA OPTIONS

	HEALTH CARE FSA	LIMITED PURPOSE FSA	DEPENDENT CARE FSA
Who may enroll?	Non-HDHP plan participants	HDHP plan participants	All employees
What types of expenses are reimbursable? ²	Eligible medical, dental, vision, and prescription drug expenses (includes deductibles, copays, and coinsurance)	Eligible dental and vision expenses only (includes deductibles, copays, and coinsurance)	Eligible dependent care expenses (includes childcare, day camps, after school care, and adult daycare)
What is the maximum annual contribution?	\$3,500 ¹	\$3,500 ¹	\$3,750 or \$7,500 ^{1,3}
Does the Company contribute?	No	No	No
Do leftover funds roll over each year?	Yes, up to \$700 ¹ can be rolled over from your 2027 FSA account		No, you must use it or lose it – funds remaining at the end of the plan year are forfeited

¹ Projected limits, the IRS has not announced the 2027 limits yet

² For a list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

³ The dependent care FSA contribution limit is \$3,750 for single filers and couples filing jointly and \$7,500 for married couples filing separately.

Flexible Spending Accounts (FSAs) continued

Tax-advantaged FSAs are a great way to save money. The money you contribute to these accounts comes out of your paycheck without being taxed, and you withdraw it tax-free when you pay for eligible health care and dependent care expenses.

HSA vs. Health Care or Limited Purpose FSA: What’s the difference?

	HSA	Health Care & Limited Purpose FSA
Available if you enroll in a ...	HDHP Plan	Non-HDHP plan
Eligible for Company contributions	Yes	No
Change your contribution amount any time	Yes	No
Access your entire annual contribution amount from the beginning of the plan year	No	Yes
Access only funds that have been deposited	Yes	No
“Use-it-or-lose-it” at year-end	No	Yes*
Money is always yours to keep	Yes	No

* Except for allowed rollover amount.

Managing your FSA(s)

When you enroll in a Health Care or Limited Purpose FSA, you will receive a debit card, which you can use to pay for eligible expenses. Depending on the transaction, you may need to submit receipts or other documentation to your FSA administrator.

What’s an eligible expense?

Health Care FSA – Plan deductibles, copays, coinsurance, and other health care expenses. To learn more, see IRS Publication 502 at www.irs.gov.

Dependent Care FSA – Child day care, babysitters, home care for dependent elders, and related expenses. To learn more, see IRS Publication 503 at www.irs.gov.

Commuter Benefits

Another way to save money through tax-free spending is with Aristocrat’s commuter benefits program. You can use before-tax dollars to pay for monthly parking or transit costs related to your work commute. It’s easy and flexible. Before-tax deductions are allowed up to the IRS limit of \$350¹ per month for parking or transit.

For more information, call Aristocrat Commuter Benefits at 800-357-6246 or visit www.hsabank.com

¹ Projected limits, the IRS has not announced the 2027 limits yet



Dental

Healthy teeth and gums are important to your overall wellness. That’s why it’s important to have regular dental checkups and maintain good oral hygiene. Learn about the dental plans available to help you maintain your oral health.

Delta Dental DHMO

With this plan, you choose a primary dental provider to manage your care, and it is in-network benefit coverage only. There are no charges for most preventive services, no claim forms and no deductibles. Reduced, pre-set charges apply to other services.

Delta Dental DPPO

These plans offer you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and lower your out-of-pocket costs if you choose a dentist who participates in the Delta Dental network.

Key Dental Benefits	DHMO	DPPO 1000 (Base)		DPPO 2000 (Buy-Up)	
	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible (per calendar year)					
Individual / Family	None / None	\$50 / \$150		\$50 / \$150	
Benefit Maximum (per calendar year; preventive, basic and major services combined)					
Per Individual	None	\$1,000		\$2,000	
Covered Services					
Preventive Services	No charge	No charge		No charge	
Basic Services	See Schedule	20%*		10%*	
Major Services	See Schedule	50%*		40%*	
Orthodontia (Child & Adult)	\$1,900 Max. Adult, \$1,700 Children; see schedule for details	Not covered		50%*, \$2,000 Lifetime Maximum	

Benefits with an asterisk () require the deductible be met before the Plan beings to pay.

Dental 2027 per-paycheck deductions (before tax)

Plan	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Employee + Family
DHMO Plan	\$0.00	\$0.00	\$0.00	\$0.00
PPO Plan 1000	\$5.39	\$11.49	\$18.57	\$27.51
PPO Plan 2000	\$14.42	\$25.96	\$30.86	\$46.33



Vision

Having vision coverage allows you to save money on eligible eye care expenses, such as periodic eye exams, eyeglasses, contact lenses, and more for you and your covered dependents.

VSP 130 Plan

This plan, with premiums 100% covered by Aristocrat for all tier levels, includes comprehensive coverage with an annual eye exam and pays up to \$130 towards contacts every year or glasses every 2 years.

VSP 150 Plan

This plan provides more comprehensive coverage, which includes an annual eye exam and pays up to \$150 towards contacts every year or glasses every year. This plan also offers LightCare, \$150 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of a prescription glasses or contacts.

VSP Easy Choice Plan

This plan offers the most comprehensive coverage, including an annual eye exam, plus one upgrade option each year. Choose from:

\$250 total frame allowance (increased from \$150), anti-reflective lenses, progressive lenses, photochromatic lenses, contacts (in lieu of glasses), or a \$200 general allowance.

Key Vision Benefits	VSP 130 (Base)		VSP 150 (Buy-Up) & VSP Easy Choice	
	In-Network	Out-of-Network Reimbursement	In-Network	Out-of-Network Reimbursement
Exam	\$25	Up to \$45	\$10	Up to \$45
Materials Copay	\$25	N/A	\$10	N/A
Lenses Single Vision Bifocal Trifocal	Covered after Materials copay	Up to \$30 Up to \$50 Up to \$65	Covered after Materials copay	Up to \$30 Up to \$50 Up to \$65
Frame	\$130	Up to \$70	\$150	Up to \$70
Contact Lenses (in lieu of glasses)	\$130	Up to \$105	\$150	Up to \$105
Frequency (Exam, Lenses, Frames)	12 / 12 / 24 months		12 / 12 / 12 months	

Vision 2027 per-paycheck deductions (before tax)

Plan	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Employee + Family
VSP 130 Plan	\$0.00	\$0.00	\$0.00	\$0.00
VSP 150 Plan	\$2.41	\$4.89	\$5.24	\$8.42
VSP Easy Choice	\$3.96	\$8.06	\$8.64	\$13.85

Money-Saving Tip

Remember, you may be able to use your health savings or flexible spending account for qualified out-of-pocket dental and vision expenses

Focus on Wellness

The wellness programs and services below are available to medical plan members based upon your specific plan choice. Use these resources to help you and your family live a healthier lifestyle, remain active and enjoy the best life possible.

Wellness Programs		
Virtual Care Gone are the days when you must be stuck in traffic or even leave your home to visit the doctor for non-life-threatening issues. Telemedicine services provide a convenient, low-cost, and time-saving alternative for health care via computer, tablet, or smartphone. Teladoc (through Aetna Medical) Aetna Virtual Primary Care™ powered by Teladoc Health® (AVPC) is a nationwide virtual primary care solution that connects members to care when and where they need it, conveniently and affordably. This product offers a virtual provider, supported by a robust care team, to coordinate care across the entire health care journey. Members can message their provider and care team at any time and be connected with in-person care at MinuteClinic and CVS HealthHUB locations, or in-network providers, when needed.	Enhanced Clinical Support (through Aetna Medical) Aetna's enhanced clinical support program provides members with personalized, coordinated care. Your dedicated clinical team will help coordinate care among doctors and specialists, schedule appointments, review your treatment plan, and connect members with appropriate resources. The program is intended to make it easier to navigate the health care system and follow through with a treatment plan. They may proactively reach out by phone to support your ongoing treatment. Maven Clinic (through Aetna Medical) Provides 24/7 virtual support for fertility and family building, maternity and newborn care, parenting and pediatrics, and menopause and midlife health. Members have unlimited video visits and messaging with specialists, along with access to a personal care team, expert articles, videos and on-demand classes.	Lantern Lantern helps members navigate complex specialty care, including planned surgery, cancer treatment and infusion therapy. The program connects members with high-quality providers and offers care navigation, nurse-led support and assistance coordinating appointments, treatment options and appropriate sites of care. Virta Health Virta Health is a virtual program that helps eligible members manage weight, improve metabolic health, and prevent or reverse type 2 diabetes through personalized nutrition and lifestyle coaching. Members receive support from health coaches and clinicians, along with digital tools to track progress and manage their health. Depending on the plan and clinical eligibility, members may also receive connected monitoring devices and medication-management support. GLP-1 prescriptions for weight loss management will now be administered through Virta and an employer subsidy for monthly prescriptions will be provided through RxSaveCard.
Teladoc: www.Teladoc.com/Aetna	Clinical Support: 1-855-610-0854 (TTY: 711) Maven Clinic: www.mavenclinic.com/join/oe-26	Lantern: www.lanternicare.com/for-members Virta Health: www.virtahealth.com/join

Take advantage of preventive care benefits

Good preventive care can help you stay healthy and detect any “silent” problems early, when they’re most likely to be treatable. Most in-network preventive services are covered in full, so there’s no excuse to skip it.

- **Have a routine physical exam each year.** You’ll build a relationship with your doctor and can reduce your risk for many serious conditions.
- **Get regular dental cleanings.** Numerous studies show a link between regular dental cleanings and disease prevention — including lower risks of heart disease, diabetes, and stroke.
- **See your eye doctor at least once every two years.** If you have certain health risks, such as diabetes or high blood pressure, your doctor may recommend more frequent eye exams.

Don’t have a personal doctor? You should. Here’s why.

- **Better health.** Getting the right health screenings each year can reduce your risk for many serious conditions. And remember, preventive care doesn’t cost you anything.
- **A healthier wallet.** A PCP can help you avoid costly trips to the emergency room. Your doctor will also help coordinate specialist care, if needed.
- **Peace of mind.** Advice from someone you trust means a lot when you’re healthy, but it’s even more important when you’re sick.

Focus on Wellness

The wellness programs and services below are available to either all employees, or to plan members based upon your specific plan choice. Use these resources to help you and your family live a healthier lifestyle, remain active and enjoy the best life possible.

Wellness Programs

Employee Assistance Program (EAP) through Lyra Health

Life is full of challenges, and sometimes balancing them all can be difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The EAP is provided at NO COST to you through Lyra.

Lyra can help with the following issues:

- Mental health
- Neurodivergent behavior management
- Relationships or marital conflicts
- Child and eldercare
- Substance abuse
- Grief and loss
- Legal or financial issues

Lyra benefits:

- Up to 12 in-person coaching or counseling sessions per issue, per year, per individual (through Health Plan Integration, members can continue past 12 sessions in-network)
- Specialized care management for neurodivergent behaviors, including 1-on-1 consultations and skills-building lessons
- Medication management through Health Plan Integration
- Unlimited toll-free phone access and online resources

Contact Lyra anytime, day or night, by:

- Calling 877-248-1047
- Visiting www.aristocrat.lyrahealth.com
- Scanning the QR code



Virtual Dentistry (through Delta Dental)

Virtual dentistry offers members convenient access to a Delta Dental dentist for answers to questions, quick checkups, second opinions or other oral health needs in between visits to the dentist's office. Virtual assessments don't count towards exam frequency limitations and are a covered benefit for Delta Dental PPO™ and Delta Dental Premier® members.

Hinge Health

Hinge Health provides virtual musculoskeletal care for back, joint and muscle conditions. This program is available for Aetna members at NO COST. Members receive guided exercises, one-on-one clinical support and education through the Hinge app, with additional support from physical therapists, health coaches and, when appropriate, pain-relief technology

Virtual Dentistry: www.deltadentalins.com

Hinge Health: www.hingehealth.com/for/aristocrattechnologies

Get care from your couch

When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of your home to sit in a crowded waiting room full of other sick people. A virtual consultation with Delta Dental or Teladoc Health lets you talk with a provider from the comfort of your home or office at about the same cost as in-person office visits. Consider a virtual visit when your doctor isn't available, you become ill while traveling, or you're considering visiting a hospital emergency room for a non-emergency health condition.

Our virtual wellness program through Lyra Health is available to all employees at no cost. Maven Clinic, Virta Health, Lantern, Hinge Health, and enhanced clinical support are available to Aetna members at no cost.



Aristocrat's life and disability insurance programs are designed to help secure your income and provide your family with peace of mind knowing their financial needs will be looked after if something happens to you.

Life and AD&D Insurance

Employee basic life and AD&D insurance

You automatically receive basic life and accidental death and dismemberment (AD&D) insurance so that you can protect those you love from the unexpected. There is no cost to you for this coverage. Your benefit amount will be one times your base salary up to \$500,000.

Benefit Amount (Company-Paid)	
Employee	1x Annual Salary up to \$500,000

Employee supplemental life and AD&D insurance

If you want added protection, you can purchase supplemental life and AD&D insurance for yourself. You may elect coverage up to 5 times your base annual salary, in \$10,000 increments up to \$1,000,000

Spouse/domestic partner voluntary life and AD&D insurance

You may also purchase Life and AD&D insurance for your spouse/domestic partner when you enroll in coverage for yourself. Spouse/domestic partner coverage is available up to \$250,000 and cannot exceed your own coverage amount.

What is AD&D insurance?

Should you lose your life, sight, hearing, speech or use of your limb(s) in an accident, AD&D provides additional benefits to help keep your family financially secure. AD&D benefits are paid as a percentage of your coverage amount — from 50% to 100% — depending on the type of loss.

Child voluntary life and AD&D insurance

You have the option of purchasing child life and AD&D insurance at \$5,000 or \$10,000 benefit amounts, when you enroll in coverage for yourself.

Benefit Amount by Coverage Tier (Supplemental)		Guaranteed Issue ¹
Employee	\$10,000, up to 5x annual salary up to \$1,000,000	\$500,000
Spouse/DP	100% of employee amount up to \$250,000	\$50,000
Child(ren)	\$5,000 or \$10,000	\$10,000

1. During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.
2. If you are currently enrolled in supplement life, you can increase your coverage by \$20,000 during open enrollment without needing an EOI.

Have you named a beneficiary?

Be sure you've selected a beneficiary for all your life and accident insurance policies. The beneficiary will receive the benefit paid by a policy in the event of the policyholder's death. It's important to designate a beneficiary and keep that information up-to-date. Beneficiary information must be listed in Workday.

Disability insurance

The loss of income due to illness or disability can cause serious financial hardship for your family. Our disability insurance programs work together to replace a portion of your income when you're unable to work. The disability benefits you receive allow you to continue paying your bills and meeting your financial obligations during this difficult time.

Quick Look:

DISABILITY INSURANCE

	Short-Term Disability	Basic Long-Term Disability
Who pays	Employer	Employer
Benefit provided	Up to 66.67% of before-tax weekly earnings	Up to 60% of before-tax monthly earnings
Maximum benefit payable	\$2,500 per week	\$10,000 per month
Maximum benefit duration	26 weeks	Until you're no longer considered disabled or you reach normal retirement age, whichever comes first
When benefits begin (Elimination Period)	Immediately or the day you become disabled (due to injury), immediately (due to hospitalization during pregnancy), or on the 8th day (due to sickness)	180 days

1

Short-Term Disability (STD): You are automatically enrolled in the STD benefit but will still need to submit a claim to receive benefits.

2

Long-Term Disability (LTD): You are automatically enrolled in the LTD benefit but will still need to submit a claim to receive benefits, which begins after 180 days of disability.



What the STD and LTD Plans Do Not Cover

The STD and LTD plans don't cover disabilities caused by:

- An accident that occurs on the job
- Self-inflicted injury, whether you are sane or insane
- War, whether declared or not, or international armed conflict
- Active participation in a riot
- Disabilities during employment with another employer
- Disability incurred while participating in an illegal act

Retirement savings plan

401(k) savings plan

Your Company 401(k) Savings Plan, administered by Mercer Wise PEP, supported by Empower, provides advantages you may not get with other types of savings plans and helps you meet one of life's important goals — saving for a financially secure retirement.

Eligibility

You are automatically eligible for the Aristocrat 401(k) plan on your date of hire, but your deferral can take up to at least 30 days to be taken from your check.

Your contributions

You can contribute to your 401(k) with before-tax money, Roth after-tax money, or both. The type of contributions you make will depend on your financial goals and circumstances. Both before-tax and Roth after-tax contributions count toward the IRS maximum of \$25,500 for 2027¹. You can contribute 1% – 100% of your eligible earnings up to IRS limits and if you are age 50 or older, you may make additional catch-up contributions — up to \$34,000¹ for 2027.

Anyone age 60-63 may make a special annual catch-up contribution up to the greater of \$11,750¹ or 150% of the "standard" catch-up contribution amount in effect for the taxable year (indexed for inflation annually).

Company matching contributions

Once eligible and enrolled, Aristocrat matches 100% up to the first 4% of your contributions to support your retirement saving efforts.

Traditional vs. Roth 401(k) plan

There are two main types of 401(k) retirement savings plans: traditional and Roth. The difference really comes down to a single word: **TAXES**.

TRADITIONAL 401(k) - This one's for anyone who wants to put off paying taxes. Any money you save or invest isn't taxed until you withdraw it in retirement. Withdrawals are considered income and will be taxed at your current (retirement) federal and state tax rates. A traditional 401(k) also reduces your overall annual income, so you'll pay lower taxes while working.

Example: If your annual salary is \$35,000 and you contribute \$5,000 to a traditional 401(k), you'll only pay taxes on \$30,000 for that year.

ROTH 401(k)* - A Roth 401(k) functions similarly to a traditional 401(k) plan, with one big difference — you make contributions to a Roth 401(k) with after-tax dollars. This type of plan is for anyone who wants to pay taxes now. Then, when you pull money out of the plan during retirement, you won't pay any taxes on the withdrawal.

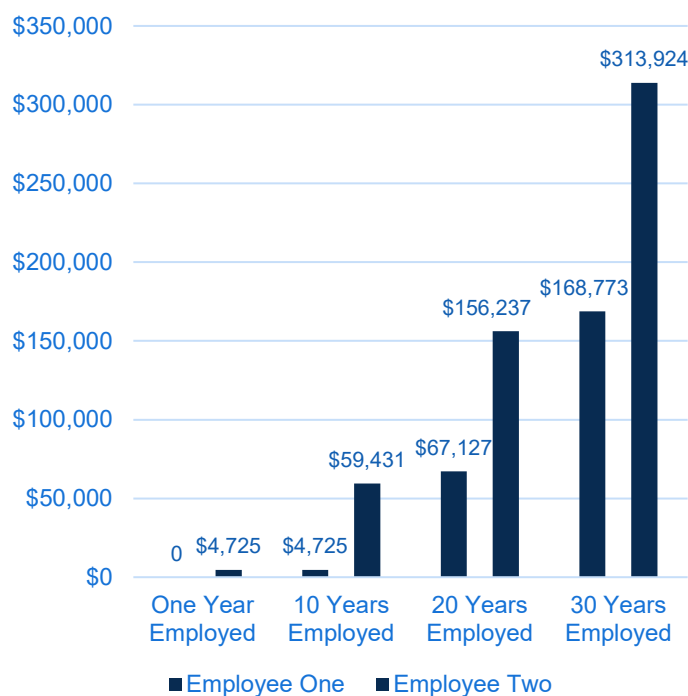
* There are no taxes on a withdrawal/distribution from ROTH 401(k) if it is a qualified distribution:

1. At least 5 years must have passed from the first day of the calendar year in which you made your first Roth 401(k) contribution.
2. Triggering event – the withdrawal is after you've turned age 59 ½
3. You've become disabled
4. Your death

Starting early pays off!

Compounding interest example

Starting your retirement savings journey early can pay off. As your account balance grows, you earn a larger amount due to compounding interest. Take for example two employees. Employee One begins contributing his first year of employment, while Employee Two waits until his 10th year of employment. Both employees contribute 5% to their 401(k) and receive a 4% match from Aristocrat.** When both employees are ready to retire at age 67, Employee One who signed up for the 401(k) plan the first year has nearly double the amount of Employee Two who waited several years to join the plan. Employee One's money was invested longer and was able to take advantage of compounding interest for more years.



¹ Projected limits, the IRS has not announced the 2027 limits yet

** Based on both employees receiving the same average rate of return.

Traditional 401(k) Highlights

Pros:



Employee-managed – Easy way to save using payroll deductions. Choose from several investment funds.



Contribute more each year – Higher contribution limit and catch-up feature for anyone 50 or older. 2027 Limit ¹: \$25,500 (\$34,000 after the age of 50). **Note:** Limits are for traditional and Roth 401(k) contributions combined.



Increased savings potential – Contributions aren't taxed when deducted from your paycheck, so you save more each pay period. This means more interest earned, and more money in the long run.

Cons:



Taxes at withdrawal – When you take money out at retirement, you'll pay taxes at the current federal and state rates, which could be higher if rates rise each year.

Investment elections

The plan offers you a variety of investment options to choose from. It's important to carefully consider your investment goals, retirement timeframe, and risk tolerance when deciding how to invest your plan contributions. Visit www.mercerwise.com to learn more about your investment options.

Vesting

Vesting refers to your ownership of the money in your account. You are always 100% vested in your own contributions. You become fully vested in any Company contributions after 2 years of employment.

After-tax contributions

Made to your Plan account after taxes are deducted from your eligible pay, these contributions allow you to save beyond the IRS limit placed on pre-tax and Roth 401(k) contributions. You may contribute up to 100% of your eligible pay in combined pre-tax, Roth 401(k), and after-tax contributions, not to exceed the annual additions limit. The annual additions limit is the total dollar amount that you and your employer may contribute to your Plan account each year. This limit for 2027 is \$75,000 ¹, excluding any catch-up contributions. Any earnings on after-tax contributions are taxable upon withdrawal. After-tax contributions are not eligible for the employer match.

¹ Projected limits, the IRS has not announced the 2027 limits yet

Roth 401(k) Highlights

Pros:



Employee-managed – Easy way to save using payroll deductions. Choose from several investment funds.



Similar contributions – A Roth 401(k) has the same annual contribution limits as a traditional 401(k). **Note:** Limits are for traditional and Roth 401(k) contributions combined.



Secure – Again, this type of 401(k) is transferable if you leave the Company.



No taxes upon withdrawal – When you retire, the money you see in your Roth 401(k) is what you get – no tax deductions occur.

Cons:



Contributions are not tax deductible – Roth contributions do not allow you to lower your taxable income at the time contributions are withheld from your paycheck.

Enrolling in the plan

Mercer Wise will receive your demographic data after you receive your first paycheck. They will then create an account for you and auto-enroll you for a 4% deferral the first of the month after 30 days. If you would like to opt out of the plan or defer a different percentage, you will need to contact Mercer Wise at (833) 637-2379 or online at www.mercerwise.com.

Please note that you will not be able to make these changes until your account is set up with Mercer Wise and that will not occur until after your first paycheck is received.



SELF benefits

Aristocrat's voluntary benefits, such as accident, critical illness, and hospital indemnity insurance, provide an added layer of protection by paying a cash benefit for specifically covered events that you can use for out of pocket expenses that you choose. Accident, Critical Illness, and Hospital Indemnity Insurance are limited benefit policies. They are not health insurance and they do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Supplemental health insurance

Accident insurance

No matter how good your medical insurance plan is, it won't cover everything if you have a serious accident. This means you'll still have out-of-pocket expenses. If you miss work because of an accident, your living expenses such as food, a mortgage, utilities, etc. won't stop.

Accident insurance pays you benefits for specific injuries and events resulting from a covered accident that occurs outside of work. Covered injuries or events include such things as a broken bone, burn, concussion or ruptured disc.

Meet Mary



A **broken leg** meant Mary had to stay off her feet for a while, with several weeks of physical therapy. While she was recovering, Mary's accident insurance helped her cover her out of pocket expenses.

Mary used part of her accident insurance benefit toward her physical therapy copays. She used the rest toward after school care for her children while she was at physical therapy appointments.

Provided as an example only. Actual results may vary.

Meet Miguel



Miguel was having trouble breathing and had to be hospitalized for several days. He used his hospital indemnity insurance to pay out of pocket that his primary medical plan didn't cover.

Provided as an example only. Actual results may vary.

Critical illness insurance

The treatment to recover from a critical illness is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You're likely still responsible for deductibles and coinsurance. And if you miss work because of treatments, that only adds to the financial impact.

Critical illness insurance pays a lump-sum benefit if you are diagnosed with a covered disease or condition on or after your effective date. You choose benefits to protect yourself and any eligible family members. Once enrolled, if you are diagnosed with a covered critical illness, you will receive a lump-sum cash benefit. You decide how to use the cash benefits.

See the product brochure, certificate of coverage and any applicable riders for a complete list of covered conditions, along with complete provisions, exclusions and limitations.

Meet Steve



A **heart attack** forced Steve to take an extended leave. While he has medical insurance through Aristocrat, Steve was still responsible for paying out-of-pocket costs that he didn't anticipate. With his critical illness insurance, Steve was able to pay for some of his out of pocket expenses without dipping into his savings.

Steve used part of his critical illness insurance benefit toward his deductible and coinsurance for a surgery and hospital stay. He used the rest toward ongoing costs for outpatient cardiac rehabilitation and prescription medications.

Provided as an example only. Actual results may vary.

Hospital indemnity insurance

A hospital stay, whether unexpected or not, can affect your finances even when you do have medical insurance. But having Hospital Indemnity Insurance coverage in place before a hospitalization can help minimize the financial impact and provide support at a time when it's needed most.

Hospital indemnity insurance pays a cash benefit if you have a covered stay in a hospital. This benefit is paid directly to you and is intended to help you with those out of pocket expenses that range from copays to parking to groceries while you recover. You can use the cash benefits however you wish.

See the product brochure, certificate of coverage and any applicable riders for the definition of covered facilities, along with complete provisions, exclusions and limitations.

Voluntary Benefits

Legal Services

ARAG Legal insurance is a voluntary benefit that provides access to attorneys who can offer help and advice on a variety of legal issues. The plan can cover you and your eligible dependents. The plan gives you access to identity theft services, guardianship services, home buying services, home equity loans, home refinancing services, and more!

Identity theft protection

LifeLock™ with Norton™ Benefit Plans help protect your digital life by combining leading identity theft protection, device security, and more, in an always-connected world. Everyday things like online shopping, banking and even browsing can expose personal information and make you vulnerable to cybercriminals and identity theft. LifeLock helps monitor your personal accounts and sends you alerts* if they detect potential threats to your identity. If you should become a victim of identity theft, they'll work to resolve it. Norton's multi-layered, advanced security helps protect against existing and emerging malware threats to your devices and helps protect your private and financial information when you go online.

Learn more about this benefit offering by reviewing the microsite at www.Norton.com/PremPremierPlus

No one can prevent all identity theft or cybercrime.

** Norton LifeLock does not monitor all transactions at all businesses.*

Pet insurance

Voluntary Pet insurance, through Nationwide helps you save on unexpected veterinary expenses plus optional coverage to help pay for routine veterinary care, such as vaccines, wellness exams, and teeth cleaning. Premiums are paid directly to Nationwide.

Pet Discount and Pharmacy Plan

Wishbone provides voluntary pet discount programs to help you save on your pet care needs. Pet Assure provides discounts on veterinary services like office visits, vaccinations, hospitalizations and more. Pet Assure also includes access to a lost pet recovery service. PetPlus provides discounts on pet products and prescriptions such as medications, vitamins, treats, and more. PetPlus includes access to a 24/7 pet telehealth staffed by licensed vets. Enroll in either the pet discount program, the pharmacy plan, or both at any time throughout the year.



TIP: You won't pay income tax on any voluntary benefits you choose because contributions are deducted on a post-tax basis. This means premiums are paid with after tax dollars, so any reimbursements or payouts you receive from these plans are not taxable income



Contacts

Please contact the appropriate provider listed below to learn more about a specific benefit plan.

Benefit Plan	Provider	Policy #	Phone Number	Website
ATI Benefits	–	–	–	www.atibenefits.com mypc@aristocrat.com
Healthcare Concierge Service	TouchCare	–	866-486-8242	assist@touchcare.com www.touchcare.com/ask
Open Enrollment Support	TouchCare	–	–	www.touchcare.com/openenrollment
Online Benefits Counselor	ALEX	–	–	www.start.myalex.com/aristocrat
 HEALTH benefits				
Medical	Aetna	231720	866-831-0016	www.aetna.com
Virtual Visits	Teladoc	Benefit through Aetna	855-Teladoc (835-2362)	www.teladoc.com/Aetna
Prescription Drug Coverage	Express Scripts	–	800-282-2881	www.express-scripts.com
HSA/FSA/Commuter Benefits	HSA Bank	–	800-357-6246	www.hsabank.com
Dental	Delta Dental	DPPO: 18597 DHMO: 79080	PPO: 800-521-2651 HMO: 800-422-4234	www.deltadentalins.com
Vision	VSP	30071075	800-877-7195	www.vsp.com , imember@vsp.com
Maternity, Menopause, Parenting, and Pediatric Support	Maven Clinic	Benefit through Aetna	888-861-1329	www.mavenclinic.com/join/oe-26 support@mavenclinic.com
Specialty Care (Surgery, Cancer, and Infusion Treatment)	Lantern	165401	855 358-1886	www.lanterncare.com/for-members
Back, Joint, and Muscle Pain Management and Support	Hinge Health	–	855-902-2777	www.hingehealth.com/for/aristocratechnologies
Weight Management and Metabolic Health Support	Virta Health	–	844-847-8216	www.virtahealth.com/join support@virtahealth.com
Employee Assistance Program (EAP)	Lyra	–	877-248-1047	www.aristocrat.lyrahealth.com , care@lyrahealth.com
COBRA	Optum Financial	–	855- 687-2021	www.cobra.optumfinancial.com
 WEALTH benefits				
Life and AD&D Insurance	Prudential	73387	800-524-0542	www.prudential.com/link2benefits
Disability Insurance	Prudential	73387	800-842-1718	www.prudential.com/link2benefits
401(k) Savings Plan	Mercer Wise	–	833-637-2379	www.mercerwise.com
 SELF benefits				
Voluntary Benefits (Accident, Critical Illness, Hospital Indemnity)	Voya	71358-9CAC2, 71358-9CCI2, 71358-9CHI	877-236-7564	www.presents.voya.com/EBRC/aristocrat
Legal Plan	ARAG	18209	800-247-4184	www.ARAGlegalcenter.com Access Code: 18209ari
Identity Theft Protection	Norton Lifelock Identity Theft Protection	–	800-607-9174	www.norton.com/PremPremierPlus
Pet Insurance	Wishbone (formerly Pet Benefits Solutions)	3896	800-887-5708	https://www.wishbone.pet/total-pet
	Nationwide	–	877-738-7874	www.petinsurance.com/aristocrat



This guide is intended to describe the eligibility requirements, enrollment procedures, plan highlights, and coverage effective dates for the benefits offered by Aristocrat. It is not a legal plan document and does not imply a guarantee of employment or continuation of benefits. While this guide is a tool to answer many of your benefit questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. The noted plan changes in this guide may serve as a Summary of Material Modifications (SMM) to the SPD. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will prevail.